BEST AVAILABLE COPY

•			M	ULTIP	LE DE	PENDE	NT CLA	CLAIM			SERIAL NO. FILING DATE							
	FEE CALCULATION SHEET							1	FO(OU)(C)									
	. (FOR USE WITH FORM PTO-875) CLAIM AS FILED AFTER AFTER								APPLICA	INT(S)		 		·		·		
ı									IS				*****					
		<u> </u>			1°AM	1"AMENDMENT		2 MAMENDMENT			ASI	FILED	LED. Al		AFTER			
1		- -"	ND.	DEP.	IND.	IND. DEP.		IND. DEP.			IND.	IND. DEP.		IND. DEP.		2 MAMENDMENT		
	2		<u> </u>	1	 	 				51		DDI.	MAD.	DEP.	IND.	DE	Р.	
ŀ	3		<u> </u>	7			 	 	.]	52 53					-		_	
ŀ	<u>· 4</u> 5							<u> </u>		54	 	 						
L	6			-/	1	 				55		 	 	 				
-	7					 	7			56		.,		 	 		\dashv	
ŀ	8			1						57 58		ļ					ᅱ	
1	10	┪—	1	/	 	ļ		•		59	1	ļ						
	11				i			·		60								
ŀ	12 13	-						<u>-</u>		61 62	<u> </u>	·				 	ᅱ	
1	14	┪—		-}-					i i	63							\dashv	
	15			7						64 -							\exists	
F	16 17	-		I_{-}					ŀ	65 66							-1	
H	18									67							\dashv	
	19									68							7	
-	20 21					-			 	69 70							\dashv	
-	22	+	-							71								
	23								L	72							4	
-	24. 25	-							1	73 74							۲.,	
L	26	 								75							1	
L	27								-	76 77							-	
H	28 29	 							-	78							1	
	30									79 .							-	
<u> </u>	31 32							 	J	80 81							1	
1	33	 								82							1	
	34						, -			83							-	
	35· 36	 							-	84 85							1	
	37	 						-	<i></i>	86		7				<u> </u>]	
	38								ļ	87							┨	
	39 40		-						} -	88 89							1	
	41		-							90							1.	
	42								. -	91							1	
	43 44								—	92 93							1	
	45		+							94							1	
	46								_	95								
	47 48			,					1	96 97						· · ·		
	49		- -							98								
	50									99							1	
тот.	AL IND.	3,		1		#		1		100		-	·				ļ	
tor	L DEP	74				¢a	⊿			TAL IND.	·	4		4		春	l	
	TAL AIMS	7						A CONTRACTOR	<u></u>	OTAL				(m		(=		
		-/-		STATE OF THE PERSONS	18	WANTS.				LAIMS					in a			
770	- 1360	(REV. 11/	01)					•			U.S	. DEPARTM	ENT of CON	MERCE		-	ł	